DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 100200034-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and

joint inventor (if plural patent is sought on the RE-RECORDABLE DATA	names inventi	are listed below) of th on entitled:	e subject matter wh	nich is claimed a			
the specification of wh	ich is at	tached hereto unless ti	ne following box is c	hecked:			
() was filed on	as US Application No. or PCT International Application						
	and was amended on(if applicable).						
I hereby state that I hincluding the claims, a disclose all information	s amen	ded by any amendmer	t(s) referred to about	ve. I acknowle			
Foreign Application(s) and/or	Claim of	Foreign Priority					
I hereby claim foreign priorisinventor(s) certificate listed I a filing date before that of the	pelow and	have also identified below	any foreign application fo				
COUNTRY	T	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED	UNDER 35 U.S.C. 119		
				YES:	NO:		
	Ì			YES:	NO:		
Provisional Application							
I hereby claim the benefit u below:	nder Title	35, United States Code Sec	ction 119(e) of any Unite	d States provisional	application(s) listed		
		APPLICATION NUMBER	FILING DATE				
U. S. Priority Claim I hereby claim the benefit u		BB 12 2 1B 2 B 4 B					
insofar as the subject matter manner provided by the first information as defined in Tit application and the national APPLICATION NUMBER	t paragrap le 37, Cor or PCT int	th of Title 35, United States de of Federal Regulations, Se	Code Section 112, I act ction 1.56(a) which occupplication:	knowledge the duty	to disclose material ing date of the prior		

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	·						
POWER OF ATTORNEY: As a named inventor, I he business in the Patent and T		Office connected therewith:) and/or agent(s) to pro-	secute this applicat	on and transact all		
Customer	Number	022879	Number Bar Coda Labal hera				
Send Correspondence to			Direct Telepho	one Calls To:			
HEWLETT-PACKARD CO		n	Timothy F. M	yers			
P.O. Box 272400 Fort Collins, Colorado 80527-2400			541 715 4197				
POR Collins, Colorado a	U3Z7-Z4C	IV					
I hereby declare that a made on information with the knowledge imprisonment, or both false statements may j	and be that wi , under	lief are believed to be Ilful false statements Section 1001 of Title	true; and further th and the like so m 18 of the United Si	at these statem lade are punish tates Code and	ents were made able by fine or that such willful		
Full Name of Inventor: Bag-Sung Bruce Yeh Citizenship: US							
Residence: 4844 NW Bruno Place, Corvallis, OR 97330							
Post Office Address: Si	ame as	residence					
Bassim	y U	telr	······································	7/9/03	3		
Inventor's Signature) 	<u> </u>	Date				

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (c ntinued)

ATTORNEY DOCKET NO. 100200034-1

Full Name of # 2 joint inventor:	Michael J. R gan		Citizenship: US
Residence:	3210 NW Arrowood Circl Corvall	is OR 97	7330
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husting 12		6	120/2003
Inventor's Signature'		Date	
Full Name of # 3 joint inventor:			Citizenship: US
Residence:	119 Seale Ave Palo Alto CA 943	101	
Post Office Address:	Same as residence	**************************************	
Inventor's Signature			100%
mventor a orginature		Date	
Full Name of # 4 joint inventor:			Citizenship:
Residence:			***************************************
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 5 joint inventor:			Citizenship:
Residence:			Ciuzensiip:
Post Office Address:			
Inventor's Signature		Date	
Full Name of # 6 joint Inventor	;		Citizenship:
Residence:	**************************************	***************************************	
Post Office Address:			

Inventor e Signature		Date	
Full Name of # 7 joint inventor	•		Citizenship:
Residence:			
Post Office Address:	***************************************		
Inventor's Signature			
meaning a diffusion		Date	
Full Name of # 8 joint inventor	**		Citizenship:
Residence:			
Post Office Address:			9 - MAN 10 - 10 - 10 - 10 - 10 - 10 - 10
Inventor's Signature		Date	